



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8582

<b>SERIAL NUMBER</b> 10/816,291	<b>FILING OR 371(c) DATE</b> 04/01/2004 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2109	<b>ATTORNEY DOCKET NO.</b> A2003015(2)
------------------------------------	---	---------------------	-------------------------------	---

## APPLICANTS

Shailendra Mathur, Beaconsfield, CANADA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/460,635 04/04/2003 P.S.:

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

"NONE" P.S.:

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

06/16/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 5	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>Shailendra Mathur</i> Initials: P.S.				

## ADDRESS

26643

## TITLE

Graphical user interface for providing editing of transform hierarchies within an effects tree

<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---